

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LW	68904	3/3/00
O.I.P.E. CLASSIFIER		13	3/13/00
FORMALITY REVIEW		71422	5-1-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	12/15/02
2	✓	✓	6/26/03
3	✓	✓	6/21/04
4	✓	✓	
5	✓	✓	
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If more than 150 claims or 10 actions  
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